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CERTIFICATE OF FACSIMILE TRANSMISSION I hereby certify that this correspondence is being facsimile transmitted to the U.S. Patent and Trademark Office on the date indicated below. Sandra Genua Typed/Printed Name  Signature 03-17-2006 Date	APPLICATION NO.	10/724,309
	FILING DATE	11/26/2003
	FIRST NAMED INVENTOR	Liu, et al.
	ART UNIT	2653
	CONFIRMATION NO.	2994
	EXAMINER	Heinz, Allen J.
	ATTORNEY DOCKET NO.	R1883
TITLE	MAGNETIC HEAD FOR PERPENDICULAR RECORDING WITH MAGNETIC LOOP PROVIDING NON-PERPENDICULAR WRITE FIELD	

ATTACHED WITH THIS SUBMISSION:

1. Transmittal FAX Cover Sheet (this sheet)
2. Authorization to Act in a Representative Capacity - Form PTO/SB/84 (1 page)

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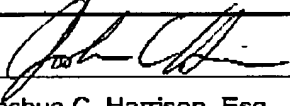
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AUTHORIZATION TO ACT IN A REPRESENTATIVE CAPACITY

In re Application of: Liu, et al.					
Application No. 10/724,309					
Filed: 11/26/2003					
Title: MAGNETIC HEAD FOR PERPENDICULAR RECORDING WITH MAGNETIC LOOP PROVIDING NON-PERPENDICULAR WRITE FIELD					
Attorney Docket No. R1883	Art Unit: 2653				
<p>The practitioner named below is authorized to conduct interviews and has the authority to bind the principal concerned. Furthermore, the practitioner is authorized to file correspondence in the above-identified application pursuant to 37 CFR 1.34:</p> <table border="1"><thead><tr><th>Name</th><th>Registration Number</th></tr></thead><tbody><tr><td>Janyce R. Mitchell</td><td>40,095</td></tr></tbody></table>		Name	Registration Number	Janyce R. Mitchell	40,095
Name	Registration Number				
Janyce R. Mitchell	40,095				
<p>This is not a Power of Attorney to the above-named practitioner. Accordingly, the practitioner named above does not have authority to sign a request to change the correspondence address, a request for an express abandonment, a disclaimer, a power of attorney, or other document requiring the signature of the applicant, assignee of the entire interest or an attorney of record. If appropriate, a separate Power of Attorney to the above-named practitioner should be executed and filed in the United States Patent and Trademark Office.</p>					
SIGNATURE of Practitioner of Record					
Signature 	Date 16 MAR 06				
Name Joshua C. Harrison, Esq.	Registration No., if applicable 45,686				
Telephone (949) 672-6119					

This collection of information is required by 1.31, 1.32 and 1.34. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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